



HAPPY 75TH ANNIVERSARY IROQUOIS AMPHITHEATER!
SIT DOWN! SPONSOR A SEAT! JOIN US AND CELEBRATE!

SIT DOWN! HAVE A SEAT! GET YOUR NAME OUT THERE! Be a part of Iroquois Amphitheater 75th anniversary!
Ensure our quality, enriching programming expands to reach those across Metro Louisville and surrounding areas.

Sponsor a seat for \$100. Your name will be imprinted onto a plaque affixed to the seat.

Recognition will be on our website.

I would like to sponsor _____ of seats for a total donation of \$ _____

Choose 3 Preferences (From attached seating chart). Seats are sponsored on a first come, first serve basis. You will be notified of your final selection.

SEATING PREFERENCE (If you are sponsoring more than 2 seats, please request an additional form by calling 368-5865)

SEAT ONE:			SEAT TWO:		
	ROW	SEAT		ROW	SEAT
1 st Preference:	_____	_____	1 st Preference:	_____	_____
	ROW	SEAT		ROW	SEAT
2 nd Preference:	_____	_____	2 nd Preference:	_____	_____
	ROW	SEAT		ROW	SEAT
3 rd Preference:	_____	_____	3 rd Preference:	_____	_____

Name(s) as you would like it to appear on plaque: (LIMIT 22 CHARACTERS PER PLAQUE)

SEAT ONE: _____

SEAT TWO: _____

PLEASE PRINT CLEARLY

☐ Check here if this is in honor / memory of someone: _____

PAYMENT INFORMATION

____ I'm enclosing my check made payable to: The Louisville Metro Parks Foundation with Iroquois Amphitheater in the memo line

____ I'd like to pay using my credit card ____ Visa ____ MC ____ Disc ____ AMEX

Name as it appears on card: _____

Credit Card No. _____ Exp: _____

Billing Address: _____

City: _____ St: _____ Zip: _____

Email Address: _____ Phone: _____

Amount to charge: \$ _____

Please return this to: IROQUOIS AMPHITHEATER, 1080 AMPHITHEATER ROAD, LOUISVILLE, KY 40214

OR SCAN AND EMAIL TO: amphitheater@louisvilleky.gov

All donations to the Iroquois Amphitheater are tax deductible. Seats will be inscribed within 6-weeks of payment.